RESPONSE NEEDED DUE TO:

CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION

INSTRUCTIONS: Complete items 1 - 10 on the form. Use a separate form for each policy interpretation request. If additional space is needed, please use the second page. Be sure to identify the additional discussion with the appropriate number and heading. Retain a copy of the CF 24 for your records.

Questions from counties, including county Quality Control, must be submitted by the county CalFresh Coordinator and may be submitted directly to the CalFresh Policy analyst assigned responsibility for the county, with a copy directed to the appropriate CalFresh Policy unit manager.

where the hearing took place, with a copy of the form directed to the appropriate CalFresh Bureau unit manager.

Questions from Administrative Law Judges may be submitted directly to the CalFresh Policy analyst assigned responsibility to the county

	MEADALIAE LIERARA BLICARA			
1.	RESPONSE NEEDED DUE TO:	5.	DATE OF REQUEST:	NEED RESPONSE BY:
	Policy/Regulation Interpretation		JANUARY 16, 2014	
	□ QC	6.	COUNTY/ORGANIZATION: SUTTER COUNTY	
	Fair Hearing	7.		
	U Other:			SSUANCE REPAYMENT
2.	REQUESTOR NAME: LORI YOUNG	8.	REFERENCES: (Include ACL/AC NOTE: All requests must have a	N, court cases, etc. in references) regulation cite(s) and/or a reference(s).
3.	PHONE NO.: 530-822-4411 X 217		ACL 12-25, ACL 12-25E	
4.	REGULATION CITE(S): MPP 63-801.737			
9.	QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):		ar WHIRMH	
	SAR ACL 12-25 STATES RECOUPMENT BY ALLOTMENT ADJUSTMENT ON OVERISSUANCES WILL ONLY BE INITIATED AT THE BEGINNING OF A PAYMENT PERIOD, UNLESS IT DOES NOT RESULT IN A DECREASE TO THE ALLOTMENT AMOUNT. CAN THE COUNTY BEGIN RECOUPMENT MID PERIOD IF THE CUSTOMER HAS RETURNED THE DFA 377.7E1 REPAYMENT AGREEMENT REQUESTING RECOUPMENT BY ALLOTMENT ADJUSTMENT BEGIN SOONER THAN			
	THEN NEXT PAYMENT PERIOD?		THE CHILLY ADOUGH	ENT BEGIN SOONEN MAN
10.	REQUESTOR'S PROPOSED ANSWER:			
	NO PROPOSED ANSWER			
	THE THE TOTAL PROPERTY OF THE TOTAL PROPERTY			
11.	STATE POLICY RESPONSE (CFPB USE ONLY):			
	Per the Manual of Policies and Procedures section 63-801.7 overissuance through benefit adjustment until the beginning provide additional payments to reduce their overissuance ob and/or additional installment payments and/or use of existing	of a ligat	payment period. CalFres ion by providing a lump so	h households may elect to um payment (full or partial).
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DATE RESPONDED TO COUNTY/ALJ:

04/30/2014 sc

CF 24 (7/12)

DATE RECEIVED:

01/16/2014

RESPONSE NEEDED DUE TO: Policy/Regulation Interpretation	5. DATE OF REQUEST: NEED RESPONSE BY:		
☐ QC ☐ Fair Hearing	6. COUNTY/ORGANIZATION: 7. SUBJECT:		
Other:			
REQUESTOR NAME:	REFERENCES: (Include ACL/ACIN, court cases, etc. in references) NOTE: All requests must have a regulation cite(s) and/or a reference(s).		
PHONE NO.:			
REGULATION CITE(S):			